

DMH Satisfaction Survey Results

Consumer Satisfaction - 2001

Alcohol and Drug Abuse Services - Non-Residential Family

Who Completed the Forms

One question on the survey asked who completed the survey form. The following table describes who completed the forms for people served by the Division of Alcohol and Drug Abuse.

	Total ADA Non- Residential	CSTAR Adult Women	CSTAR Child/Adol.	CSTAR General	GTS Adult	GTS Child/Adol.	Methadone
Mother	90 (50.0%)	2 (33.3%)	72 (72.7%)	3 (25.0%)	8 (16.3%)	5 (55.6%)	0 (0%)
Father	24 (13.3%)	0 (0%)	12 (12.1%)	1 (8.3%)	9 (18.4%)	2 (22.2%)	0 (0%)
Guardian	6 (3.3%)	0 (0%)	1 (1.0%)	0 (0%)	4 (8.2%)	1 (11.1%)	0 (0%)
Spouse	16 (8.9%)	2 (33.3%)	1 (1.0%)	2 (16.7%)	8 (16.3%)	0 (0%)	3 (60.0%)
Other	44 (24.4%)	2 (33.3%)	13 (13.1%)	6 (50.0%)	20 (40.8%)	1 (11.1%)	2 (40.0%)

Sample Size

Information is based on the number of returned forms and the number of people served according to DMH billing records.

<i>Non-Residential Family</i>	Number Forms Sent - April 2001	Number Forms Returned	Percent of Served Returned
Total Non-Residential Family Members	1932	202	10.5%
CSTAR Women/Children Family	181	8	4.4%
CSTAR Women Alternative Family	20	0	0%
CSTAR Child/Adolescent Family	643	110	17.1%
CSTAR General Family	200	13	6.5%
GTS Adult Family	665	57	8.6%
GTS Child/Adolescent Family	123	9	7.3%
Methadone Family	100	5	5.0%

Demographics of Family Member Receiving Services

Person completing form provided demographics of their family member receiving services.

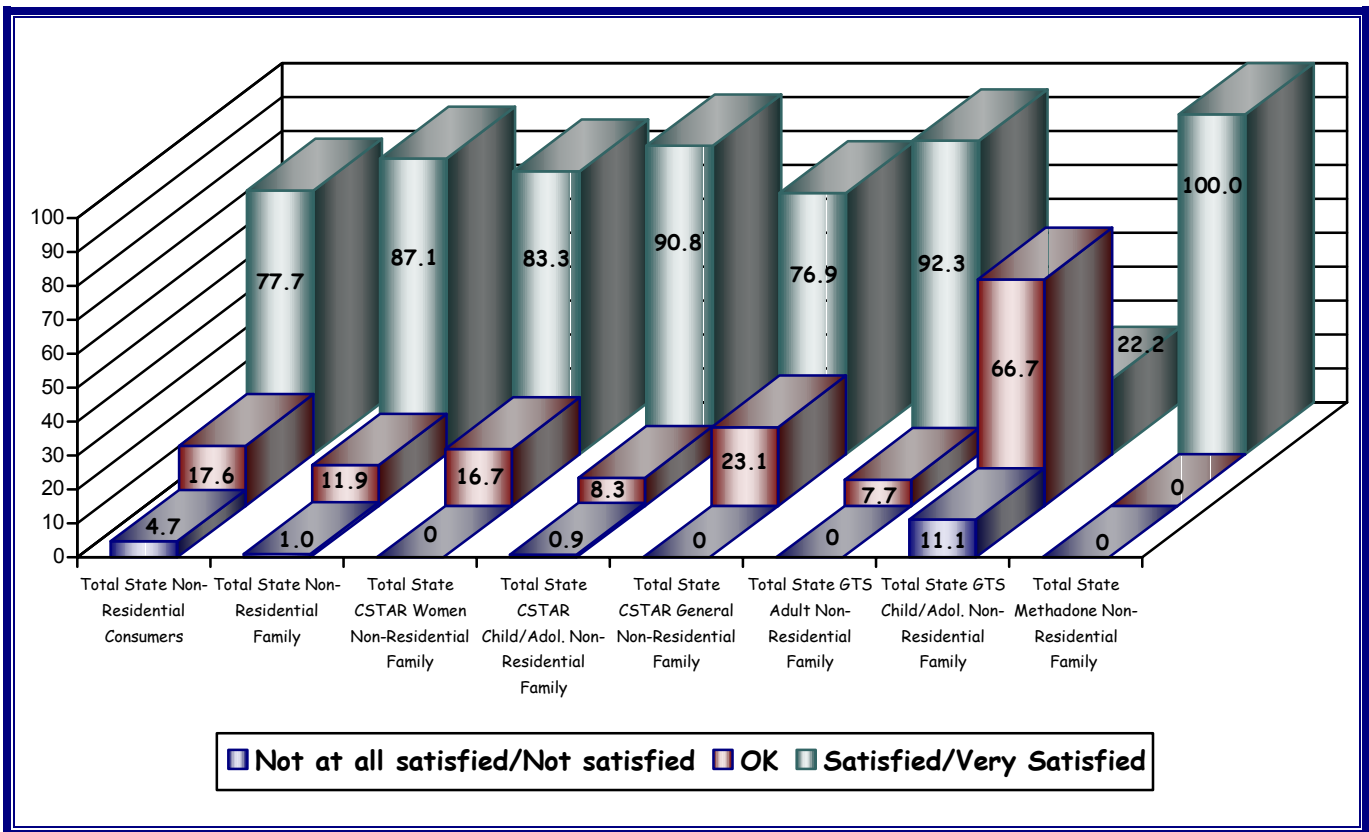
		Total State Served Consumers ^a	Total Family Survey Returns	CSTAR Women	CSTAR Child/ Adolescent	CSTAR General	GTS Adult	GTS Child/ Adolescent	Methadone Consumers
SEX	Male	64.5%	67.4%	16.7%	72.2%	41.7%	73.1%	66.7%	40.0%
	Female	35.5%	32.6%	83.3%	27.8%	58.3%	26.9%	33.3%	60.0%
RACE	White	68.3%	90.3%	57.1%	90.2%	100.0%	94.3%	87.5%	75.0%
	Black	29.7%	5.9%	28.6%	5.9%	0%	3.8%	0%	25.0%
	Hispanic	0.6%	0.5%	0%	0%	0%	1.9%	0%	0%
	Native American	0.5%	0.5%	0%	1.0%	0%	0%	0%	0%
	Pacific Islander	0.1%	0.5%	0%	1.0%	0%	0%	0%	0%
	Other	0.7%	2.2%	14.3%	2.0%	0%	0%	12.5%	0%
AGE			24.27	27.43	16.29	36.75	36.15	14.89	46.80
	0-17	10.0%	57.4%	0%	95.2%	8.3%	0%	100.0%	0%
	18-49	83.6%	39.5%	100.0%	4.8%	83.3%	90.6%	0%	100.0%
	50+	6.5%	3.2%	0%	0%	8.3%	9.4%	0%	0%

Is Your Family Member's Life Better

One question on the family member survey addressed the issue of whether or not their family member's life has improved because of the services received. The following table shows the results of this question.

Is your family member's life "better" now than before s/he began receiving services?	Yes	No	Unsure
Total ADA Non-Residential	138 (72.6%)	3 (1.6%)	49 (25.8%)
CSTAR Women	4 (66.7%)	1 (16.7%)	1 (16.7%)
CSTAR Child/Adolescent	85 (81.7%)	0 (0%)	19 (18.3%)
CSTAR General	12 (92.3%)	0 (0%)	1 (7.7%)
GTS Adult	26 (49.1%)	0 (0%)	27 (50.9%)
GTS Child/Adolescent	6 (66.7%)	2 (22.2%)	1 (11.1%)
Methadone	5 (100.0%)	0 (0%)	0 (0%)

Overall Satisfaction with Services



Program Satisfaction: Percent of responses to the question "How satisfied are you with the services you receive?"

Some of the key findings were:

- Statewide, 87.1% of family members of consumers served by the Division of Alcohol and Drug Abuse (ADA) Non-Residential programs were "satisfied" or "very satisfied" with services.
- The highest satisfaction rating was in the Methadone program where 100% of the families who responded to the survey were "satisfied" or "very satisfied" with services. The GTS Adult program was also rated high with 92.3% satisfied.
- The lowest percent who were "satisfied" or "very satisfied" with services was found in the families of GTS Child/Adolescent consumers where only 22.2% noted this rating.

Satisfaction with Services

How satisfied are you . . .	Total Consumers	Total Family Member Forms	CSTAR Women/Children	CSTAR Child/Adolescent	CSTAR General	GTS Adult	GTS Child/Adolescent	Methadone
with the staff who serve your family member?	4.22 (2079)	4.41 (196)	4.40 (5)	4.56 (109)	4.08 (13)	4.35 (55)	3.44 (9)	4.60 (5)
with how much your family member's staff know about how to get things done?	4.07 (2071)	4.30 (193)	3.80 (5)	4.39 (108)	3.77 (13)	4.43 (53)	3.33 (9)	4.40 (5)
with how your family member's staff keep things about his/her life confidential?	4.25 (2075)	4.44 (196)	4.00 (6)	4.57 (109)	4.00 (13)	4.48 (54)	3.44 (9)	4.60 (5)
that your family member's treatment plan has what he/she wants in it?	4.09 (2063)	4.18 (192)	3.83 (6)	4.19 (107)	3.92 (13)	4.37 (52)	3.56 (9)	4.40 (5)
that your family member's treatment plan is being followed by those who assist him/her?	4.13 (2061)	4.28 (194)	3.83 (6)	4.30 (108)	4.08 (13)	4.47 (53)	3.56 (9)	4.40 (5)
that the agency staff respect your family member's ethnic and cultural background?	4.29 (2035)	4.45 (190)	4.17 (6)	4.57 (106)	3.92 (13)	4.42 (52)	3.88 (8)	4.80 (5)
with the services that your family member receives?	4.19 (2072)	4.36 (194)	4.33 (6)	4.45 (109)	4.08 (13)	4.40 (52)	3.22 (9)	4.60 (5)
that services are provided for your family member in a timely manner?	4.03 (2079)	4.34 (195)	4.17 (6)	4.45 (109)	3.85 (13)	4.45 (53)	3.22 (9)	4.20 (5)
The first number represents a mean rating. Scale: 1=Not at all satisfied . . . 5=Very satisfied. The number in parentheses represents the number responding to this item.								

Some of the key findings were:

- Statewide, family members of consumers served by the Division of Alcohol and Drug Abuse Non-Residential programs reported that they were satisfied with services. All mean ratings were at least a 4.00 ("satisfied").
- Family members were most satisfied with the staff's respect of ethnic and cultural backgrounds (mean of 4.45).
- Family members were least satisfied with the content of the treatment plan (4.18).
- The Methadone clinic family members were most satisfied with the services received (mean of 4.60).

Satisfaction with Quality of Life

How satisfied are you . . .	Total Consumers	Total Family Member Forms	CSTAR Women/Children	CSTAR Child/Adolescent	CSTAR General	GTS Adult	GTS Child/Adolescent	Methadone
with how your family member spends his/her day?	3.73 (2065)	3.64 (190)	3.67 (6)	3.63 (104)	3.83 (12)	3.70 (54)	3.00 (9)	3.80 (5)
with where your family member lives?	3.73 (2050)	3.99 (186)	3.83 (6)	4.17 (101)	3.54 (13)	3.75 (53)	4.00 (8)	4.40 (5)
with the amount of choices your family member has in his/her life?	3.61 (2072)	3.66 (188)	3.67 (6)	3.63 (104)	3.75 (12)	3.77 (53)	2.88 (8)	4.00 (5)
with the opportunities/chances your family member has to make friends?	3.80 (2063)	3.69 (190)	3.83 (6)	3.63 (104)	3.85 (13)	3.83 (53)	3.11 (9)	4.00 (5)
with your family member's general health care?	3.71 (2036)	4.05 (190)	3.83 (6)	4.23 (105)	3.77 (13)	3.79 (53)	4.00 (8)	4.20 (5)
with what your family member does during his/her free time?	3.77 (2065)	3.43 (189)	3.67 (6)	3.29 (103)	3.85 (13)	3.70 (54)	2.63 (8)	3.40 (5)
How safe do you feel...								
your family member is in his/her home?	4.24 (2914)	4.31 (195)	4.43 (7)	4.53 (108)	4.15 (13)	3.81 (53)	4.56 (9)	4.80 (5)
your family member is in his/her neighborhood?	4.01 (2920)	4.04 (193)	4.29 (7)	4.18 (106)	4.08 (13)	3.66 (53)	4.22 (9)	4.20 (5)
<p>The first number represents a mean rating.</p> <p><i>How satisfied are you?</i> Scale: 1=Not at all satisfied . . . 5=Very satisfied.</p> <p><i>How safe do you feel?</i> Scale: 1=Not at all safe . . . 5=Very safe.</p> <p>The number in parentheses represents the number responding to this item.</p>								

Some of the key findings were:

- The family member's responses to the quality of life questions indicated less satisfaction than their answers pertaining to satisfaction with services.
- Family members were most satisfied with safety in the home (mean 4.31) and least satisfied with what their family member does during his/her free time (mean of 3.43).

ADA Non-Residential Family Subjective Responses

What was liked best About the Program

The families noted many benefits their family members and they received from the Division of Alcohol and Drug Abuse. One typical response about the program in general was *The staff have been wonderful to work with. My son has learned a lot during his affiliation with C-Star. We have seen a lot of growth and maturity on his part.* Another was that the program was *balanced well with goals.* Their responses have been summarized in the following pages.

Outcome for Children:

Many parents noted a positive outcome for their child(ren). *For her to put things in proper perspective and deal with them and not hide from things or try and justify them.* The program gave the children an opportunity to see other options. *The services gave N... a chance to learn that there are other options.* The program taught one child to be *more responsible and make better decisions.* The program also gave one child *a future to look forward to.* For another it was *having to be drug free has given my son a new chance in life.*

Outcome for Adult Family Members:

Positive effects were seen for adult family members. *Helps get off drugs and improve confidence.*

Staff:

The staff were reported to be a major benefit of the program. Many aspects of the staff were cited. One was their *professionalism.* The staff was seen as caring. *Most of the staff really care about my child making changes in life.* Another noted a similar response. *They seem to care about the kids.* The support from the staff was highly appreciated. The staff seemed *sincere and genuine with care they provide all of their clients.* They were seen as *always available.* The staff were also willing to help. *How all the staff is willing to help in anyway.*

Communication:

Parents often feel that they do not receive enough communication about how their child is doing. There were some cases in which good communication between the parent and the treatment center was noted *Daily feedback really helped mom cope.*

Support for Clients:

The families noted that there was good *support for clients.* This is often shown by the *concern for the child.* The program was noted by one family as *gives him a support outside the family with positive place to be three times a week.* The staff *give it their all and more to really help people that need it.* *They knew the right words and ways to help those people to deal with their problem: hang their head up high. I would like to say thanks to those people and keep up the hard work.* The counselor was *easy to talk to and has a lot of good ideas and ways to implement the ideas.*

Therapy:

For some families, it was the therapy itself. *Counseling*. There was some kudos for the education program also: *drug education and discussions*. The program was seen as helping children by *teaching them independence and survival skills*. The program provided multiple *treatment options* for the clients.

Outside Activities:

Some of the activities outside of the treatment center impressed the families. The *prison tour* was cited as a benefit of the treatment program. For another family, it was *the outdoor experience*. The program provided some of the children activities they had not done before. *My child got to do some things he had never done before*.

Drug Education:

The parents saw the children, especially, as learning about drugs and their effects. *Education about drugs*.

Transportation:

The transportation service was quite helpful. *The 'bus' services to pick my child up at school and feel he is going to C-STAR more regularly due to this*.

Administrative Staff:

One family noted the assistance of the *financial staff who work with the family*.

Structured Program:

The structured environment was seen as a positive component of the program. *Is told and shown things that I try to tell him, but doesn't want to listen when I try to give him advice. He gets to eat a lot and stay clean too. More structure than at home*.

Environment:

The facility was seen as *clean*. There was an efficiency about some aspects of care, *intake is efficient*. The building was seen as *safe and quiet with entertainment*. *Food was great*. It was a *good environment for recovery*. It was seen as a *safe area and with good food*. The ability to *call out on a pay phone* was seen as helpful.

Fellowship with Others:

Being with other people who have the same challenges can often be of assistance. *Interacting with others dealing with the same things*.

What Could Be Improved

While there were many who noted that services were *excellent*, there were some suggestions for the improvement of these services:

Program and Environment:

One family member recommended that *the environment to be on a higher moral standard*. Another wanted *more time in Level I*. Several respondents wanted *bigger and better facilities*.

Staff:

Several respondents wanted *more direct staff to client care*. Another wanted *more client-staff time*.

More Activities:

For one family, there was a need for *more camping events in level 2:3*. Another asked for *more structured activities in level 2 and 3*. One respondent wanted *more activities for detox clients*. Another person wanted *more activities at the center*.

Better Family Therapy:

Some family members reported a need for more qualified staff for family counseling. For one family, family therapy was not successful, *We tried family therapy for awhile, but she was a loser*. Another noted a similar response. *Our family therapy has not given us any help. She is always late and only tries to look smart, but doesn't help*. Another noted *better family-centered counseling*.

Parent Education:

The need was mentioned for more *parent education*. For another it was *help me be a better parent*. One parent wanted *gender counseling*.

Other Participants:

For one family, the other participants in the program were an issue. *I was not pleased that my child was with kids that she associated with before treatment in her therapeutic home*.

Better Communication:

Some parents felt a need for *more direct feedback from counselor to parents (without threatening child's confidentiality and trust)*. Another family wanted *more contact with everyone living in the home*. Another stated it was *more contact/interaction with parents - we are clueless about what goes on with* This was echoed by another parent *keep parents better informed with what is going on with their child*.

Community/School Integration:

Many adolescents who enter an outpatient or inpatient treatment program have difficulty getting back into school. For one parent it was *better integration back to school*.

School Work:

While the program works with adolescents who are still in school, some of these teens may fall behind in their studies. *Work more to keep up on school work. I did my part of getting assignments to C-Star. They failed to get them back to school.*

More Support Services:

One family felt the need for more support services. *More support services because I did not have any!! I was left to fend for myself even though a caseworker was assigned. I had to be his therapeutic family. I did NOT have caseworker available to me to discuss my concerns with.*

Smoking:

One respondent wanted *a smoking lounge inside*. Another wanted *more smoke breaks*. This was a repeated request.

More Family Visits:

One person wanted *more family visits*.